



Crossroads Learning Center Water Sampling Lead Analysis Report

1. INTRODUCTION

1.1. GENERAL

This report presents the results of our water sampling performed at the site of Crossroads Learning Center, 2441 E. Seven Mile Rd., Detroit, MI., on May 31st, 2016. The sample results taken in conjunction with this investigation are also presented on Appendix 1.

1.2. OBJECTIVES AND SCOPE

In general, the objectives of this investigation were to:

Accurately evaluate water outlets for lead above the EPA Maximum Contaminate Level (MCL).

1.3. AUTHORIZATION

Authorization was provided by phone for our Professional Services by Glenda Reed on May 18th, 2016.

2. SITE INVESTIGATIONS

2.1. FIELD PROGRAM

In order to sample and evaluate water, GSES took six samples, a First Draw sample and a Flush sample, from three different locations on the site.

The field portion of our investigation was under control and continual supervision of an experienced member of our field scientist staff.

2.2 LABORATORY TESTING

2.2.1. General

In accordance with ASTM D3559 and the U.S. Environmental Protection Agency guidelines for lead in drinking water at schools and child care facilities, we took two samples: first draw and flush, which is the required testing standard for drinking water lead contamination.



GS GROUP LLC

Green S.P.A.C.E.S Protect Our Earth

Results of the tests indicate that the water is below the threshold for lead contamination. A copy of the lab report and Chain of Custody is attached (Appendix 1).

3. DISCUSSIONS AND RECOMMENDATIONS

3.1. DISCUSSIONS OF FINDINGS

The water results are below the threshold for lead contamination.

We appreciate the opportunity of providing this service for you. If you have any questions concerning this report or require additional information, please do not hesitate to contact the undersigned.

Respectfully submitted,

Michael Etters
Field Scientist

Monica Starks, CIEC
Principal

Council-certified Indoor Environmental
Consultant Board-awarded by the
American Council for Accredited
Certification



Appendix 1, Lab Results, Chain of Custody

17800 Woodward Ave Suite 200
Detroit, MI 48203



GS GROUP LLC

Green S.P.A.C.E.S Protect Our Earth

APPENDIX 1
Laboratory Results and Chain of Custody

17800 Woodward Ave Suite 200
Detroit, MI 48203

Laboratory ID: 0055

National Testing Laboratories, Ltd
556 South Mansfield, Ypsilanti, MI, 48197-5166
(440) 449-2525, Fax: (440) 449-8585

ANALYTICAL REPORTS

SAMPLE CODE: 356805

6/23/2016

2441 E. 7 Mile Rd

Customer: G. S. Group
Monica Starks
17800 Woodward Ave #200
Detroit, MI 48203

Source: Crossroads Intergenerational, DC-01-KC-01-P
Source City: Detroit
Source State: MI

Date/Time Received: 6/15/2016 15:00

Collected by: M. Etters

The results herein conform to TNI and ISO/IEC 17025:2005 standards, where applicable, unless otherwise narrated in the body of the report. The uncertainty of the test results are available upon request. All Dates and Times are reported as U.S. Eastern Time.

Legend:

Any 'Level Detected' marked with an asterisk (*) indicates that the value has exceeded the EPA Maximum Contaminant Level (MCL) or one of the Standards of Quality.

"ND" This contaminant was not detected at or above our lower reporting limit (LRL)

"NA" Not Analyzed

"Standard" This column indicates either the Maximum Contaminant Level (MCL) for EPA Primary Standards or the guideline values for EPA Secondary Standards.

"LRL" This column indicates the Lower Reporting Limit, which is the lowest level that the laboratory can detect a contaminant.

"DF" This column indicates the contaminant dilution factor.

Report Notes:

Fed Id #	Contaminant	Method	Standard	Units	LRL	Level Detected	DF	Date/Time Sampled	Date Prepped	Date/Time Analyzed
Inorganic Analytes - Metals										
1030	Lead	200.8	0.015	mg/L	0.001	ND	1	5/31/2016 07:20		6/21/2016

These test results may be used for compliance purpose as required.

Analyst	Tests
EC	200.8



James Abston, Operations Manager

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National Testing Laboratories, Ltd
556 South Mansfield, Ypsilanti, MI, 48197-5166
(440) 449-2525, Fax: (440) 449-8585

ANALYTICAL REPORTS

SAMPLE CODE: 356806

6/23/2016

Customer: G. S. Group
Monica Starks
17800 Woodward Ave #200
Detroit, MI 48203

Source: Crossroads Intergenerational, DC-01-KC-01-F
Source City: Detroit
Source State: MI

Date/Time Received: 6/15/2016 15:00

Collected by: M. Etters

The results herein conform to TNI and ISO/IEC 17025:2005 standards, where applicable, unless otherwise narrated in the body of the report. The uncertainty of the test results are available upon request. All Dates and Times are reported as U.S. Eastern Time.

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Report Notes:

Fed Id #	Contaminant	Method	Standard	Units	LRL	Level Detected	DF	Date/Time Sampled	Date Prepped	Date/Time Analyzed
Inorganic Analytes - Metals										
1030	Lead	200.8	0.015	mg/L	0.001	ND	1	5/31/2016 07:20		6/21/2016

These test results may be used for compliance purpose as required.

Analyst	Tests
EC	200.8



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ANALYTICAL REPORTS

SAMPLE CODE: 356807

6/23/2016

Customer: G. S. Group
Monica Starks
17800 Woodward Ave #200
Detroit, MI 48203

Source: Crossroads Intergenerational, DC-01-CBF-02-P
Source City: Detroit
Source State: MI

Date/Time Received: 6/15/2016 15:00

Collected by: M. Etters

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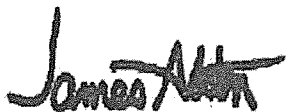
"DF" This column indicates the contaminant dilution factor.

Report Notes:

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Inorganic Analytes - Metals										
1030	Lead	200.8	0.015	mg/L	0.001	ND	1	5/31/2016 07:20		6/21/2016

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ANALYTICAL REPORTS

SAMPLE CODE: 356808

6/23/2016

Customer: G. S. Group
Monica Starks
17800 Woodward Ave #200
Detroit, MI 48203

Source: Crossroads Intergenerational, DC-01-CBF-02-F
Source City: Detroit
Source State: MI

Date/Time Received: 6/15/2016 15:00

Collected by: M. Etters

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ANALYTICAL REPORTS

SAMPLE CODE: 356809

6/23/2016

Customer: G. S. Group
Monica Starks
17800 Woodward Ave #200
Detroit, MI 48203

Source: Crossroads Intergenerational, DC-01-BF-03-P
Source City: Detroit
Source State: MI

Date/Time Received: 6/15/2016 15:00

Collected by: M. Etters

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These test results may be used for compliance purpose as required.

Analyst	Tests
EC	200.8



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ANALYTICAL REPORTS

SAMPLE CODE: 356810

6/23/2016

Customer: G. S. Group
Monica Starks
17800 Woodward Ave #200
Detroit, MI 48203

Source: Crossroads Intergenerational, DC-01-BF-03-F
Source City: Detroit
Source State: MI

Date/Time Received: 6/15/2016 15:00

Collected by: M. Etters

The results herein conform to TNI and ISO/IEC 17025:2005 standards, where applicable, unless otherwise narrated in the body of the report. The uncertainty of the test results are available upon request. All Dates and Times are reported as U.S. Eastern Time.

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These test results may be used for compliance purpose as required.

Analyst	Tests
EC	200.8



James Abston, Operations Manager

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**National Testing
Laboratories, Ltd.**

Quality Water Analysis

1-800-458-3330

General Compliance

Order Number: 2077783

Order Date: 05/20/2016

Sample Number:

Product: Lead Only

Sample Paid: No

Payment Method:

TSR: EF



Sold To:

G. S. Group

Monica Starks

17800 Woodward Ave

Detroit

MI 48203

Date Sampled: 5/31/16

Time Sampled: 7:20 Please Use Military Time, e.g. 3 00pm = 15.00

Check Time Zone: ☒ EST ☐ CST ☐ MST ☐ PST

Client Name: Crossroads Intergenerational

Address: 2441 E. 7 Mile Rd.

Phone Number: 313-233-6327

PWS ID# (if applicable):

N/A

Sample ID or Source: DC-01-KC-01-P

Source Type: ☐ Spring ☐ Well ☒ Municipal ☐ Surface

☐ Other:

City & State: Detroit, MI
(If Different than Above)

Sample Collected By: [Signature]
(Signature)

Sample Collected By: Michael Batters
(Please Print)

Form Completed By: Michael Batters

Additional Comments:

The location sampled is a daycare this is sample #1 first draw.

For Laboratory Use ONLY

Lab Accounting Information:

Payment \$:

Check #:

Lab Comments/Special Instructions:

State Forms:

Lab Sample Information:

Date Received: JUN 15 2016

Time Received: 15:00

Received By: [Signature]

☐ Sample receipt criteria checked & acceptable.

☐ Deviations from acceptable sample receipt criteria noted on PSA form.

INCOMPLETE INFORMATION MAY DELAY ANALYSIS AND/OR INVALIDATE RESULTS

National Testing
Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

General Compliance

Order Number: 2077783

Order Date: 05/20/2016

Sample Number:

Product: Lead Only

Sample Paid: No

Payment Method:

TSR: EF



Sold To:

G. S. Group

Monica Starks

17800 Woodward Ave

Detroit

MI 48203

For Laboratory Use ONLY

Lab Accounting Information:

Payment \$: _____

Check #: _____

Lab Comments/Special Instructions:

State Forms:

Lab Sample Information:

Date Received: JUN 15, 2016

Time Received: 15:00

Received By: [Signature]

☐ Sample receipt criteria checked & acceptable.

☐ Deviations from acceptable sample receipt criteria noted on PSA form.

Date Sampled: 5/31/16

Time Sampled: 7:20

Please Use Military Time, e.g. 3.00pm = 15 00

Check Time Zone: ☒ EST ☐ CST ☐ MST ☐ PST

Client Name: Crossroad Intergenerational

Address: 2441 E. 7 Mile Rd.

Phone Number: 313-233-6377

PWS ID# (if applicable):

N/A

Sample ID or Source: DC-01-KC-01-F

Source Type: ☐ Spring ☐ Well ☒ Municipal ☐ Surface

☐ Other:

City & State: Detroit Mi.

(If Different than Above)

Sample Collected By:

[Signature]

(Signature)

Sample Collected By:

Michael Etkers

(Please Print)

Form Completed By:

Michael Etkers

Additional Comments:

The location sampled is a daycare. This is Sample #1, Flush Sample

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National Testing
Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

General Compliance

Order Number: 2077783

Order Date: 05/20/2016

Sample Number:

Product: Lead Only

Sample Paid: No

Payment Method:

TSR: EF



Sold To:

G. S. Group

Monica Starks

17800 Woodward Ave

Detroit

MI 48203

Date Sampled: 5/31/16

Time Sampled: 7:20 Please Use Military Time, e.g. 3:00pm = 15:00

Check Time Zone: ☒ EST ☐ CST ☐ MST ☐ PST

Client Name: Crossroads Intergenerational

Address: 2441 E. 7 Mile Rd.

Phone

Number: 313-233-6327

PWS ID# (if applicable):

N/A

Sample ID or Source: DC-01-CBF-02-P

Source Type: ☐ Spring ☐ Well ☒ Municipal ☐ Surface

☐ Other:

City & State: Detroit, Mi.

(If Different than Above)

Sample Collected By:

(Signature)

Sample Collected By:

(Please Print)

Form Completed By:

Michael Bixler

Additional Comments:

The location sampled is a daycare. This is Sample #2,
First draw

For Laboratory Use ONLY

Lab Accounting Information:

Payment \$:

Check #:

Lab Comments/Special Instructions:

State Forms:

Lab Sample Information:

Date Received:

JUN 15, 2016

Time Received:

15:00

Received By:

(Signature)

☐ Sample receipt criteria checked & acceptable.

☐ Deviations from acceptable sample receipt criteria noted on PSA form.

INCOMPLETE INFORMATION MAY DELAY ANALYSIS AND/OR INVALIDATE RESULTS

National Testing
Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

General Compliance

Order Number: 2077783

Order Date: 05/20/2016

Sample Number:

Product: Lead Only

Sample Paid: No

Payment Method:

TSR: EF

356808

Sold To:

G. S. Group

Monica Starks

17800 Woodward Ave

Detroit

MI 48203

Date Sampled: 5/31/16

Time Sampled: 7:26 Please Use Military Time, e.g. 3:00pm = 15:00

Check Time Zone: ☒ EST ☐ CST ☐ MST ☐ PST

Client Name: Crossroads Intergenerational

Address: 2441 E. 7 Mile Rd

Phone

Number: 313-233-6327

PWS ID# (if applicable): N/A

Sample ID or Source: DC-01-CBF-02-F

Source Type: ☐ Spring ☐ Well ☒ Municipal ☐ Surface

☐ Other

City & State: Detroit, MI
(If Different than Above)

Sample Collected By: Michael D. A.
(Signature)

Sample Collected By: Michael E. Hens
(Please Print)

Form Completed By: Michael E. Hens

Additional Comments:

The location sampled is a daycare. This is Sample #2, Flush Sample

For Laboratory Use ONLY

Lab Accounting Information:

Payment \$: _____

Check #: _____

Lab Comments/Special Instructions:

State Forms:

Lab Sample Information:

Date Received: JUN 15/2016

Time Received: 15:00

Received By: [Signature]

☐ Sample receipt criteria checked & acceptable.

☐ Deviations from acceptable sample receipt criteria noted on PSA form.

INCOMPLETE INFORMATION MAY DELAY ANALYSIS AND/OR INVALIDATE RESULTS

National Testing
Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

General Compliance

Order Number: 2077783

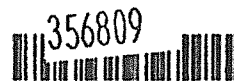
Order Date: 05/20/2016

Sample Number:

Product: Lead Only

Sample Paid: No Payment Method:

TSR: EF



Sold To:

G. S. Group

Monica Starks

17800 Woodward Ave

Detroit

MI 48203

For Laboratory Use ONLY

Lab Accounting Information:

Payment \$: _____

Check #: _____

Lab Comments/Special Instructions:

State Forms:

Lab Sample Information:

Date Received: JUN 15 2016

Time Received: 15:00

Received By: [Signature]

☐ Sample receipt criteria checked & acceptable.

☐ Deviations from acceptable sample receipt criteria noted on PSA form.

Date Sampled: 5/31/16

Time Sampled: 7:20 Please Use Military Time e.g. 3:00pm = 15:00

Check Time Zone ☒ EST ☐ CST ☐ MST ☐ PST

Client Name: Crossroads Intergenerational

Address: 2441 E. 7 Mile Rd.

Phone Number: 313-233-6327

PWS ID# (if applicable): N/A

Sample ID or Source: DC-01-BF-03-P

Source Type: ☐ Spring ☐ Well ☒ Municipal ☐ Surface

☐ Other:

City & State: Detroit, MI
(If Different than Above)

Sample Collected By: [Signature]
(Signature)

Sample Collected By: Michael B. [Signature]
(Please Print)

Form Completed By: Michael B. [Signature]

Additional Comments:

The location sampled is a daycare. This is Sample #3, First draw.

INCOMPLETE INFORMATION MAY DELAY ANALYSIS AND/OR INVALIDATE RESULTS

National Testing
Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

General Compliance

Order Number: 2077783

Order Date: 05/20/2016

356810

Sample Number:



Product: Lead Only

Sample Paid: No

Payment Method:

TSR: EF

Sold To:

G. S. Group

Monica Starks

17800 Woodward Ave

Detroit

MI 48203

Date Sampled: 5/31/16

Time Sampled: 7:20 Please Use Military Time. e.g. 3 00pm = 15.00

Check Time Zone ☒ EST ☐ CST ☐ MST ☐ PST

Client Name: Crossroads Intergenerational

Address: 2441 E. 7 Mile Rd

Phone Number: 313-233-6327

PWS ID# (if applicable):

N/16

Sample ID or Source: DC-01-BF-03-F

Source Type: ☐ Spring ☐ Well ☒ Municipal ☐ Surface

☐ Other:

City & State: Detroit, Mi
(If Different than Above)

Sample Collected By: [Signature]
(Signature)

Sample Collected By: Michael Etters
(Please Print)

Form Completed By: Michael Etters

Additional Comments:

The location sampled is a daycare. This is Sample #3, Flush Sample.

For Laboratory Use ONLY

Lab Accounting Information:

Payment \$:

Check #:

Lab Comments/Special Instructions:

State Forms:

Lab Sample Information:

Date Received: JUN 15, 2016

Time Received: 15:00

Received By: [Signature]

☐ Sample receipt criteria checked & acceptable

☐ Deviations from acceptable sample receipt criteria noted on PSA form.

INCOMPLETE INFORMATION MAY DELAY ANALYSIS AND/OR INVALIDATE RESULTS